10/598039

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
10/598039	

APPLICANT(S)	

8/16/06 CLAIMS

	AS FILED		AFTER 1ˢᵗ AMENDMENT		AFTER 2ⁿᵈ AMENDMENT			AS FILED		AFTER 1ˢᵗ AMENDMENT		AFTER 2ⁿᵈ AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1		/		51						
2						/	52						
3						/	53						
4						/	54						
5						/	55						
6						/	56						
7						/	57						
8						/	58						
9						/	59						
10							60						
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43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.			1		1		TOTAL IND.						
TOTAL DEP.				8		8	TOTAL DEP.						
TOTAL CLAIMS			9		9		TOTAL CLAIMS						

PTO - 1360 (REV. 11/04)